•	•	C	The state of the s		/ _
שַׁרְי בּמס				#22/	(K).
					2/15
	-				<del></del>
PETITION FOR EXTENSION OF TIME UND			cket Number 1966	03/607 (CRF D-165	7D) 6
CERTIFICATE OF MAILING I hereby certify that this correspondence is being	In re Application of S	Soderlund et al.			
deposited with the United States Postal Service with sufficient postage for first class mail in an envelope	Application Number			October 28, 19	99
addressed to Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-	For INSECT SODIUM CHANNELS FROM INSECTICIDE- SUSCEPTIBLE AND INSECTICIDE-RESISTANT HOUSE FLIES				
1450, on Give 37, 1003					
Name: Jo Am Whalen	Group Art Unit 1635	Ex	caminer J. Zar	a	
This is a request under the provisions or reply in the above identified application		extend the period	for filing a	TECK YO	1/1
The requested extension and appropria (check time period desired):	ate entity fee are as follo	ows		CENT	7 CK (1/100/30)
☐ One month (37 CFR 1.17	7(a)(1)) - (\$55/\$110)			\$	16000
☐ Two months (37 CFR 1.1	17(a)(2)) - (\$205/\$410)			\$	130
☐ Three months (37 CFR 1	.17(a)(3)) - (\$465/\$930	))		\$	
☐ Four months (37 CFR 1.	17(a)(4)) - (\$725/\$1450	))		\$	
Five months (37 CFR 1.1	17(a)(5)) - (\$985/\$1970	)		\$985.00	
Applicant claims small entity state	us.				
A check to cover the fee is enclose	ed.				
Payment by credit card. Form PT	O-2038 is attached.				
The Commissioner has already be application to a Deposit Account.	en authorized to charge	e fees in this			
The Commissioner is hereby authors be required, or credit any overpay I have enclosed a duplicate copy of	ment, to Deposit Accou				
I am the applicant/inventor					
assignee of record of the Statement under 37 (	entire interest. See 37 CFR 3.73(b) is enclosed		3/96).		
attorney or agent of recon	rd.				
attorney or agent under 3 Registration number	7 CFR 1.34(a). if acting under 37 CFR	R 1.34(a)	<u>.</u>		
WARNING: Information on the included on this form. Provide of	is form may become p	ublic. Credit ca			•
Jue 27, 200		Muli	ي له سله	Doll	<del></del>
Date		S	Signature		
		Michael L. Go Typed o	oldman or printed nam	e	
NOTE: Signatures of all the inventors or assign forms if more than one signature is required, see		erest or their represent	tative(s) are requi	red. Submit multipl	e
Total offorms are subm	nitted.				

07/01/2003 CCHAU1

00000099 09428371

02 FC:2255

985.00 OP